

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
	1	1						51			
2	1					52					
3	1					53					
4	1					54					
5	1					55					
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44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.	2					TOTAL IND.					
TOTAL DEP.	15	↔	↔	↔		TOTAL DEP.		↔	↔	↔	
TOTAL CLAIMS	17	████	████	████	████	TOTAL CLAIMS	████	████	████	████	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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